



Seasonal Agricultural Transportation

SPRING RESTRICTION LOAD EXEMPTION

In compliance with MCL 257.722(5)

 Single Trip

 Seasonal

Year Valid _____

Permit Number
Fee
Inspection/Other
Receipt Number

Applicant	Contact
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Name: _____	Name: _____
Address: _____	Email: _____
City/St/Zip: _____	Phone: _____

Applicant shall have a copy of this permit and the Route Notification Request provided to the Road Agency in their possession while performing the relevant agricultural commodity transportation travel. Use of restricted roads during weight restrictions will be minimized and only utilized when necessary to perform work using the agricultural vehicle or agricultural vehicle configuration (shown below) and non-restricted roads shall be used for travel when available for route travel. Permittee must notify the _____ County Road Agency by submitting a Route Notification Request form via fax or electronically at least 48 hours prior to the movement; unless otherwise approved by an authorized representative of the Road Agency.

1. Speed limit not to exceed 35 mph.
2. Normal Legal Loadings only.
3. Time of day _____
4. The Road Agency has the right to suspend this permit if weather or road conditions warrant such action.
5. Any of the following actions shall immediately void this permit and subject the applicant to appropriate legal action:
 - (a) Misrepresentation of information set forth in an application for permit.
 - (b) Noncompliance with the conditions, rules and regulations on which this permit was issued.
 - (c) A change or erasure on a permit.
6. The permittee shall be responsible for damage to the highway, to persons and to property caused by or rising from operations covered by this permit.
7. Additional conditions agreed upon _____

Origination: _____ Destination: _____

Route: _____

Attached Map _____ Yes _____ No

Year	Make/Model	VIN	Unit No.	License No.
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Authorized Signature _____ Title _____ Date _____

This Area for Road Agency Use Only

A permit is granted for the stated period and is subject to conditions on the reverse side of this permit. The Road Agency retains the right to suspend this permit if weather or road conditions warrant such action.

Approved and issued: _____

Authorized Signature _____ Title _____ Date _____

AGENCY CONTACT INFORMATION

Permit Section _____ Phone: _____ Fax: _____ Email: _____

RULES AND REGULATIONS

- 1) Permits are automatically invalidated by the violation of any of the conditions specified by the terms of the permit or false information given on the application. Failure to comply with the conditions of this permit shall be just cause for the immediate suspension or revocation of any or all permits and the operator and /or owner of the vehicle subject to appropriate legal action.
- 2) Applicant shall provide notification to the Road Agency 48 hours in advance using a Route Notification Request form provided by the Road Commission.
- 3) Travel on seasonally restricted roads during springtime weight restrictions will be minimized and only when necessary to perform work using the agricultural vehicle or agricultural vehicle configuration. Unrestricted roads shall be used for travel when available and for routine travel. The movement of vehicle and load upon said highway (s) shall be restricted to the specified hours as stated on permit. Recommended movements are early mornings when the ground is more stable.
- 4) The movement shall not impede other traffic in an unreasonable manner and at no time shall traffic be blocked from use of the highway. Vehicles and loads shall not be parked loaded or unloaded on the highway at any time.
- 5) Vehicles shall be registered as required by the Michigan Vehicle Code and will not violate any statute or valid ordinance rule or regulation by any state agency or sub-division of the state. Vehicles are to comply with all statutory provisions as to other permits, licensing, motor vehicle equipment and operations.
- 6) The driver of the vehicle shall carry this permit, route notification and rules in the vehicle to which it applies and shall have these documents available for inspection by any police officer, Motor Carrier Officer or duly authorized Road Commission agents. Permit not valid unless accompanied by supplemental route notification..
- 7) Applicant shall be responsible for any damage caused to wires, mailboxes, trees, buildings or the road including any appurtenances, and shall reimburse the appropriate parties for any damage caused by moving of said vehicle or load.
- 8) Permits are not valid if insurance expires. Applicant shall present evidence of insurance coverage on each vehicle and carry proof of insurance while operating on the highway.
- 9) Permits will be issued only for vehicles owned by the applicant or operated under a bona fide lease or rental agreement.
- 10) The vehicle transporting agricultural commodities shall not exceed "Normal Legal Loading" which is: 18,000 lbs/single axle; 13,000 lbs/tandem axle; 16,000 lbs/tandem axle on a designated county route. For all axle configurations the weight shall not exceed 700 lbs/inch of tire width. Permits will in no way supersede posted axle loading limits on any bridge/structure or highway.
- 11) The Road Agency may temporarily suspend or amend a permit, either in its entirety or in certain of its provisions due to seasonal or other special conditions.
- 12) The fee schedule is subject to change based on annual cost allocation method.

AGENCY CONTACT INFORMATION

Permit Section _____ Phone: _____ Fax: _____ Email: _____



County Road Association
OF MICHIGAN



CRA Seasonal
AG Notice
Revision 10-19-15

Permit Number (Previously Issued)

Route Notification Request

FOR SEASONAL AGRICULTURAL PERMIT

In compliance with MCL 257.722(5) via Facsimile/Email

Applicant shall have a copy of notification provided to the Road Agency in the drivers possession while performing the relevant agricultural commodity transportation travel.

Applicant	Transportation Owner/Operator
Name: _____	Name: _____
Address: _____	Address: _____
City/St/Zip: _____	City/St/Zip: _____

Contact	Contact
Name: _____	Name: _____
Email: _____	Email: _____
Phone: _____ Fax: _____	Phone: _____ Fax: _____

Notification Date: _____ Date of Move: _____ Time of Move: _____

Unit Number: _____ License Number: _____

Origination: _____ Destination: _____

Route: _____

Attached Map Yes No

By signing this permit application, I certify that I have read and will abide by the rules and regulations on the back of this sheet.

Authorized Signature _____ Title _____ Date _____

This Area for Road Agency Use Only

The driver of the above vehicle must carry a copy of the Seasonal Agricultural Springtime Weight Exemption permit, rules and regulations with a copy of this notification.

Route is approved Route is denied

Authorized Signature _____ Title _____ Date _____ Time _____

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